Division of Long Term Supports and Services Bureau of Developmental Services

Rate Structure Work Group May 6, 2022





Goals

Goals for 5/6 Meeting

- 1. Discuss service specific worksheets in the cost report
- 2. Discuss next steps for the cost report process

This Rate Setting Work Group is open to the public. Members of the public who are not on the Rate Setting Work Group can listen to the group's discussions but will not be able to ask questions or participate in discussions occurring between Work Group members.

This structure ensures that the Department can engage a diverse group of stakeholders in substantive dialogue while also providing transparency and general updates to the general public.

If you are a member of the public and have questions about the Rate Setting Work Group and/or its work, please contact us at BDSRateStructureWorkgroup@dhhs.nh.gov and we will respond as soon as possible.



Cost Report Review



Productivity

Providing billable services

Transporting individuals between residence and activities/services

Transporting individuals for medical appointments

Travel time between individuals receiving service

Coordinating transportation for the individual in support of employment

Recordkeeping, documentation, and office time (do not include documentation during the course of service provision)

'Employer time' (e.g. receiving one-on-one supervision, staff meetings, etc.)

Cancelled time with individuals (include only 'lost' time, not necessarily the length of the planned service)

Admissions and admission screenings

Incident management

Community integration services

Communication between providers / transition of care

Activities related to Medicaid eligibility (establishing, maintaining, redetermination, etc.)

Completing risk assessments, participating in ISP meetings, and developing ISPs

Completing or participating in assessments for which the member is not present

Participating in individual planning meetings

Developing cost comparison budgets, authorizations, budget modifications, and similar documents

Completing and processing 90-day monitoring checklists

Other monitoring of participants' health, safety, satisfaction, outcomes, and service utilization

Completing annual level of care determinations

Completing and following-up on incident reports

Activities related to the transition of participants from institutional settings

Program development

Program preparation/set-up/clean-up

Other - Please Describe



Day Habilitation

Information Requested Caseload and Service Design - Current Services	Example	Day Habilitation - Community Participation	PDMS
Number of individuals receiving services from your organization	50		
Number of days per year services are provided	250		
Average number of days per year a typical individual participates in the service	235.0		
Average number of hours per day services are provided	6.0		
Average number of hours per day a typical individual receives services	4.75		
Percentage of individuals receiving less than four hours of service per day	40%		
Percentage of individuals receiving four or more hours of service per day	60%		
Number of individuals receiving medication management during provision of service	1		
Caseload and Service Design - PreCOVID 19 Pandemic			
Number of individuals receiving services from your organization	50		
Number of days per year services are provided	250		
Average number of days per year a typical individual participates in the service	235.0		
Average number of hours per day services are provided	8.0		
Average number of hours per day a typical individual receives services	6.50		
Percentage of individuals receiving less than four hours of service per day	40%		
Percentage of individuals receiving four or more hours of service per day	60%		
Number of individuals receiving medication management during provision of service	1		



Day Habilitation (continued)

Information Requested	Example	Day Habilitation - Community Participation	PDMS
Length of Services (total should equal 100%)	Lxample	Farticipation	FDWG
Percentage of individuals needing services 2 or fewer hours per day	10.00%		
Percentage of individuals needing services between 2 and 4 hours per day	20.00%		
Percentage of individuals needing services between 4 and 6 hours per day	70.00%		
Percentage of individuals needing services more than 6 hours per day	0.00%		
Supervision of Direct Care Staff			
Does your organization provide on-site supervision of staff for services performed?	Yes		
If yes, how many direct care workers are supervised by 1 supervisor	4		
If yes, average number of hours of on-site supervision provided per staff during a typical week	1		
Service Delivery, Groups			
Does your organization deliver this service to groups?	Yes		
If Line 20 is Yes, what is the typical group size?	2		
Staffing Ratios. Input the percentage of face-to-face direct service time provided at each of the fol	llowing ratios:		
2:1 staff-to-individual ratio	10.00%		
1:1 staff-to-individual ratio	70.00%		
1:2 staff-to-individual ratio	20.00%		
1:3 staff-to-individual ratio	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		



Day Habilitation (continued)

Information Requested Telehealth Services	Example	Day Habilitation - Community Participation	PDMS
Does your organization deliver this service via telehealth? What percentage of day habilitation / community participation services were delivered via telehealth?	Yes 8%		
Telehealth Staffing Ratios. Input the percentage of telehealth direct service time provided at each of		tios:	
1:1 staff-to-individual ratio	10.00%		
1:2 staff-to-individual ratio	70.00%		
1:3 staff-to-individual ratio	20.00%		
1:4 staff-to-individual ratio	0.00%		
1:5 staff-to-individual ratio	0.00%		
1:10 staff-to-individual ratio	0.00%		
1:20 staff-to-individual ratio	0.00%		
1:30 staff-to-individual ratio	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		



Community Support Services

Information Requested	Example	Community Support	PDMS
Agency Caseload and Service Design		<u>.</u>	
Number of individuals receiving services from your organization	70		
Number of individuals living independently	45		
Number of individuals living with own family	25		
Number of individuals receiving medication management during provision of service	0.0		
Average number of individuals (or groups) seen per week per direct service staff worker	2		
Average service length in hours	2.0		
Number of individuals receiving medication management during provision of service	2.0		
Length of Non-Daily Services (consider services of less than 24 hours, total should equal 100%)			
For services less than 24 hours, percentage that are fewer than 4 hours	60.00%		
For services less than 24 hours, percentage that are 4 or more hours, but less than 6 hours	30.00%		
For services less than 24 hours, percentage that are more than 6 hours	10.00%		
Supervision of Direct Care Staff			
Does your organization provide on-site supervision of staff for services performed?	No		
If yes, how many direct care workers are supervised by 1 supervisor	4		
If yes, average number of hours of on-site supervision provided per staff during a typical week	1		
Service Delivery, Groups (non-telehealth)			
Does your organization deliver this service to groups?	No		
If Line 14 is Yes, what is the typical group size?	2		
Staffing Ratios. Input the percentage of face-to-face direct service time provided at each of the following	owing ratios:	<u> </u>	
2:1 staff-to-individual ratio	10.00%		
1:1 staff-to-individual ratio	70.00%		
1:2 staff-to-individual ratio	20.00%		
1:3 staff-to-individual ratio	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		



Community Support Services (continued)

Telehealth Services	
Does your organization deliver this service via telehealth?	No
If yes, what percentage of community support services were delivered via telehealth?	0.00%
Telehealth Staffing Ratios. Input the percentage of telehealth direct service time provided at each o	of the following ratios:
1:1 staff-to-individual ratio	10.00%
1:2 staff-to-individual ratio	70.00%
1:3 staff-to-individual ratio	20.00%
1:4 staff-to-individual ratio	0.00%
1:5 staff-to-individual ratio	0.00%
1:10 staff-to-individual ratio	0.00%
1:20 staff-to-individual ratio	0.00%
1:30 staff-to-individual ratio	0.00%
Other staff-to-individual ratio (type ratio here)	0.00%
Other staff-to-individual ratio (type ratio here)	0.00%
Other staff-to-individual ratio (type ratio here)	0.00%
Other staff-to-individual ratio (type ratio here)	0.00%



Supported Employment

Information Requested	Example	Supported Employment	PDMS
Agency Caseload and Service Design			
Number of individuals receiving services from your organization	70		
Average number of individuals (or groups) seen per week per job coach	10		
Average service length in hours	2.0		
Number of individuals receiving medication management during provision of service	2.0		
Supervision of Job Coaches			
Does your organization provide on-site supervision of job coaches for services performed?	Yes		
If yes, how many job coaches are supervised by 1 supervisor	4		
If yes, average number of hours of on-site supervision provided per job coach during a typical week	1		
Service Delivery, Groups (non-telehealth)			
Does your organization deliver this service to groups?	Yes		
If yes, what is the typical group size?	2		
Staffing Ratios. Input the percentage of face-to-face direct service time provided at each of the foll	owing ratios:		
1:1 staff-to-individual ratio	70.00%		
1:2 staff-to-individual ratio	20.00%		
1:3 staff-to-individual ratio	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		



Supported Employment (continued)

Telehealth Services		
Does your organization deliver this service via telehealth?	No	
If yes, what percentage of supported employment services were delivered via telehealth?	0.00%	
Telehealth Staffing Ratios. Input the percentage of telehealth direct service time provided at each	h of the followin	ng ratios:
1:1 staff-to-individual ratio	10.00%	
1:2 staff-to-individual ratio	70.00%	
1:3 staff-to-individual ratio	20.00%	
1:4 staff-to-individual ratio	0.00%	
1:5 staff-to-individual ratio	0.00%	
1:10 staff-to-individual ratio	0.00%	
1:20 staff-to-individual ratio	0.00%	
1:30 staff-to-individual ratio	0.00%	
Other staff-to-individual ratio (type ratio here)	0.00%	
Other staff-to-individual ratio (type ratio here)	0.00%	
Other staff-to-individual ratio (type ratio here)	0.00%	
Other staff-to-individual ratio (type ratio here)	0.00%	



Residential Habilitation - Staffed Residential Services

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		One Person	Two to Three	Four to Five	Six or More
Information Requested	Example	Home	Person Home	Person Home	Person Home
Service Design					
Number of individuals receiving service from your organization	50				
Number of individuals receiving medication management during provision of service	40				
Number of homes where services are provided	20				
Average absence days per member per year (vacation, hospitalization, etc.)	5.00				
Percentage of individuals regularly participating in non-residential habilitation activities (paid or					
unpaid) (e.g., Day Program, Supported Employment, School)	70%				
For members participating in non-residential habilitation activities, average number of days per					
week they participate	5.00				
For members participating in non-residential activities, average number of hours per day they					
participate	6.00				
Staffing Ratios. Input the average percentage of direct service time provided at each of the follow	ving ratios:				
1:1 staff-to-individual ratio	50.00%				
1:2 staff-to-individual ratio	20.00%				
1:3 staff-to-individual ratio	30.00%				
1:4 staff-to-individual ratio	0.00%				
1:5 staff-to-individual ratio	0.00%				
1:6 staff-to-individual ratio	0.00%				
2:1 staff-to-individual ratio	0.00%				•
2:2 staff-to-individual ratio	0.00%				
2:3 staff-to-individual ratio	0.00%				
2:4 staff-to-individual ratio	0.00%				
2:5 staff-to-individual ratio	0.00%				
2:6 staff-to-individual ratio	0.00%				
Other staff-to-individual ratio (type ratio here)	0.00%				



Residential Habilitation - Staffed Residential Services (continued)

Staffing Ratio Information					
Please enter the number of staff and participants for an average week during the cost reporting perio	d that does not i	nclude holidays. Us	sing whole num	bers, enter the	number of staff
and the number of participants by service.					
Residential Services - 24 Hour Service to more than one participant					
Average weekday # of staff per shift in a normal week					
Day (7am - 3pm)	1.00				
Swing Shift (7am - 9am)	2.00				
Evening (3pm - 11pm)	1.00				
Swing Shift (5pm - 7pm)	1.00				
Night (11pm - 7am)	1.00				
Weighted Average Weekday Staffing					
Average weekend # of staff per shift in a normal week					
Day (7am - 3pm)	1.00				
Swing Shift (7am - 9am)	2.00				
Evening (3pm - 11pm)	1.00				
Swing Shift (5pm - 7pm)	1.00				
Night (11pm - 7am)	1.00				
Weighted Average Weekend Staffing					
Weighted Average Weekly Staffing					
Average # of Participants During the Cost Report Period	3.00				
Average Participants per 1 Staff Member	-	-	-	-	-
Overnight Services					
Are staff working overnight shifts permitted to sleep?	Yes				
If yes, are overnight hours treated as 'regular' work hours subject to minimum wage and overtime					
requirements?	Yes				



Residential Habilitation - Staffed Residential Services (continued)

Square Footage	
Does your organization have square footage in residence dedicated to direct staff?	Yes
If yes, sum of square footage for dedicated direct staff sleeping areas.	100
If yes, sum of square footage for dedicated direct staff office space separate from sleeping area.	0
If yes, sum of square footage for locked medication areas.	12
If yes, enter total square footage of entire buildings.	1600
On-Site Supervision of Direct Care Staff	
Does your organization provide on-site supervision of staff for services performed?	Yes
If yes, how many direct care workers are supervised by 1 supervisor	6.00
If yes, average number of hours of on-site supervision provided per staff during a typical week	1.00



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Residential Habilitation - Enhanced Family Care

		One Person	Two Person	Three Person
Information Requested	Example	Home	Home	Home
Caseload and Service Design				
Number of individuals receiving service from your organization	50			
Number of individuals receiving medication management during provision of service	40			
Number of individuals where two stipends are paid for services provided	2			
Number of individuals paid under PDMS	15			
Number of homes where services are provided	40			
Average absence days per member per year (vacation, hospitalization, etc.)	5.00			
Average number of hours per day family caregiver is providing hands-on care for individuals in the home	10.00			
Percentage of individuals regularly participating in non-residential habilitation activities (paid or unpaid)				
(e.g., Day Program, Supported Employment)	80%			
For members participating in non-residential habilitation activities, average number of days per week				
they participate	5.00			
For members participating in non-residential habilitation activities, average number of hours per day				
they participate	6.00			
Average Hours of Additional Support Needed per Day (total should equal 100%). This is for staff bro	ught in to prov	ride support in a	addition to the	
family caregiver(s).				
Percentage of individuals not needing additional supports	40.00%			
Percentage of individuals needing additional supports 1 hour per day	40.00%			
Percentage of individuals needing additional supports 1 to 2 hours per day	20.00%			
Percentage of individuals needing additional supports 2 to 3 hours per day	0.00%			
Percentage of individuals needing additional supports 3 to 4 hours per day	0.00%			
Percentage of individuals needing additional supports 4 to 6 hours per day	0.00%			
Percentage of individuals needing additional supports 6 to 8 hours per day	0.00%			



Residential Habilitation - Enhanced Family Care (continued)

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Overnight Services			
Number of individuals requiring hands-on overnight support	2.00		
Average number of hours of hands-on overnight support	8.00		
Is the hands-on care provided by family caregiver or additional paid staff?	Family		
On-Site Supervision			
Does your organization provide on-site supervision for services performed?	No		
If yes, how many homes are supervised by 1 supervisor			
If yes, average number of hours of on-site supervision provided per home during a typical week			



Residential Habilitation - Other Residential Support

Information Requested	Example	PDMS Independent Living	PDMS Family Home	Family Home
Caseload and Service Design				
Number of individuals receiving service from your organization	50			
Number of individuals receiving medication management during provision of service	0			
Number of homes where services are provided	45			
Average absence days per member per year (vacation, hospitalization, etc.)	5			
Percentage of individuals regularly participating in non-residential habilitation activities (paid or unpaid) (e.g., Day Program, Supported Employment, School)	7500%			
For members participating in non-residential habilitation activities, average number of days per week they participate	5.00			
For members participating in non-residential activities, average number of hours per day they participate	6.00			
Average Hours of Supports Needed per Day (total should equal 100%)				
Percentage of individuals needing supports 2 or fewer hours per day	40.00%			
Percentage of individuals needing supports 2 to 4 staffed hours	20.00%			
Percentage of individuals needing supports 4 to 8 staffed hours	20.00%			
Percentage of individuals needing supports 8 to 16 staffed hours	20.00%			
Percentage of individuals needing supports 16 to 24 staffed hours	20.00%			



Residential Habilitation - Other Residential Support (continued)

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		PDMS Independent	PDMS	
Information Requested	Example	Living	Family Home	Family Home
Staffing Ratios. Input the average percentage of direct service hours provided at each	h of the following ratios:			
1:1 staff-to-individual ratio	50.00%			
1:2 staff-to-individual ratio	20.00%			
1:3 staff-to-individual ratio	30.00%			
2:1 staff-to-individual ratio	0.00%			
2:2 staff-to-individual ratio	0.00%			
2:3 staff-to-individual ratio	0.00%			
Other staff-to-individual ratio (type ratio here)	0.00%			
Other staff-to-individual ratio (type ratio here)	0.00%			
Other staff-to-individual ratio (type ratio here)	0.00%			
Other staff-to-individual ratio (type ratio here)	0.00%			
Overnight Services				
Number of individuals requiring hands-on overnight support	0.00			
Average number of hours of hands-on overnight support	0.00			
Is the hands-on care provided by family caregiver or additional paid staff?				



Respite

Agency Caseload	
Number of individuals receiving service from your organization	100
Average number of hours of service per year per individual	260.0
Average service length in hours	2.0
Number of individuals receiving medication management during provision of service	2.0
Location of Services (consider all hours of service, total should equal 100%)	
Percentage of hours provided in the individual's residence	60.00%
Percentage of hours provided in a family home other than the individual's residence	10.00%
Percentage of hours provided in another location out of the individual residence or a family home	30.00%
Length of Non-Daily Services (consider services of less than 24 hours, total should equal 100%)	
For services less than 24 hours, percentage that are fewer than 4 hours	40.00%
For services less than 24 hours, percentage that are 4 or more hours, but less than 8 hours	20.00%
For services less than 24 hours, percentage that are 8 or more hours, but less than 16 hours	20.00%
For services less than 24 hours, percentage that are 16 or more hours, but less than 24 hours	20.00%
Support Ratios. Input the percentage of face-to-face direct service time provided at each of the following ra	tios:
1:1 staff-to-individual ratio	70.00%
1:2 staff-to-individual ratio	20.00%
1:3 staff-to-individual ratio	0.00%
Other staff-to-individual ratio (type ratio here)	0.00%
Other staff-to-individual ratio (type ratio here)	0.00%
Other staff-to-individual ratio (type ratio here)	0.00%
Other staff-to-individual ratio (type ratio here)	0.00%
Overnight Services	
Are respite service providers working overnight shifts permitted to sleep?	No
If yes, are overnight hours treated as 'regular' work hours subject to minimum wage and overtime requirements?	
Service Delivery, Groups	
Does your organization deliver this service to groups?	Yes
If Line 22 is Yes, what is the typical group size?	2



Case Management

						Non
		DD Case	ABD Case	IHS Case	PDMS Case	Residential
Information Requested	Example	Management	Management	Management	Management	Case Mgmt
Caseload and Service Design	75		<u> </u>	<u> </u>		
Number of individuals receiving case management from your organization	75					
Average caseload of a case manager (for a full-time equivalent case manager)	35.0		•		•	
Do case managers have dedicated office space?	No					
Does your agency provide cell phone/ tablets to case managers or reimburse for the use of their personal						
devices?	No					
Caseload and Service Design		:		:	:	
Average number of hours to complete an annual person-centered plan	8					
Average number of quarterly reviews required per year	1			•		
# of hours per quarterly review	6.00					
Average number of additional in-person visits required per year (not including annual plan and qrtly reviews)	1					
# of hours per in-person visit	6.00					
Average number of team meetings required per year	4					
# of hours per team meeting	6.00					
Average number of monitoring calls required per year	10					
# of hours per call	1.50					
Average number of other visits/meetings - (type description here)	0.0					
# of hours per other visit/meeting	0.00					
Average number of other visits/meetings - (type description here)	0.0					
# of hours per other visit/meeting	0.00					
Average number of other visits/meetings - (type description here)	0.0			0		
# of hours per other visit/meeting	0.00					



Case Management (continued)

Crisis Services						
Average number of individuals needing crisis intervention	0.00					
Average number of crisis situations per individual per year	0.00					
Average number of hours per crisis situation	0.00					
Supervision of Case Managers						
Does your organization provide on-site supervision of case managers for services performed?	Yes					
If yes, how many case managers are supervised by 1 supervisor	10					
If yes, average number of hours of on-site supervision provided per case manager during a typical week	1.00					



Next Steps in the Cost Report Process



Next Steps

- Myers and Stauffer will continue to finalize information included on the service specific schedules.
- Myers and Stauffer will also continue to finalized functionality within the cost report.
- Watch for future correspondence detailing your role to assist us with this process.
- Take into consideration our discussion today. Provide us with any additional comments by Friday, May 13, 2022.



Questions?







